SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN
Date Kidmp (Received)

13205

Permit #: Amount Paid: 00

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Bayfield Co. Zoning Dept.

Refund:

TYPE OF PERMIT REQUESTED	TED→ □ LAND USE □ SANITARY	☐ PRIVY Address:	☐ CONDITIONAL USE ☐ SPECIAL USE State/Zip: SPECIAL USE	JAL USE B.O.A.	Telephone: 3/5
		117ES+St	1. Washburn	S.	373.6/8
Address of Property:		City/State/Zip:	9084S JR	<i>D</i> ,	
Contractor:		Contractor Phone:	Plumber:		Plumber Phone:
5	>	A CONTRACTOR OF THE PARTY OF TH			3
Authorized Agent: (Person Si	Authorized Agent: (Person Signing Application on behalf of Owner(s))	Agent Phone: 🥞 💲	Agent Mailing Address (include City/State/Zip):	State/Zip):	Written Authorization
ST PS	Device - 4/202	は で で に に に に に に に に に に に に に に に に に	すらずく	54851	☐ Yes ☐ No
		PIN: (23 digits)		Recorded Documer	<u></u>
	Legal Description: (Use Tax Statement)	020247051	02024705/1204/00020006	Volume / 077	Page(s) 246
X 1/A, X	_ 1/4 Gov't Lot Lot(s)		Lot(s) No. Block(s) No.	Subdivision:	
Section	, Township 43 N, Range 5	Town of:	•	Lot Size	Acreage A 2
			3		Q.,
SI	Is Property/Land within 300 feet of River, Stream (ind. Intermittent)	er, Stream (ind. Intermittent)	Distance Structure is from Shoreline:		Is Property in Are Wetlands
Cre	Creek or Landward side of Floodplain?	If yescontinue	The state of the s	feet Floodp	Floodplain Zone? Present?
☐ Shoreland → □ Is	ls Property/Land within 1000 feet of Lake, Pond or Flowage	ke, Pond or Flowage	Distance Structure is from Shoreline:	-	™ Yes ☐ Yes
		it yesconunue			
XNon-Shoreland	> 300' to	South Fish	そってく		
	•	CASSAGAM STANDARD CONTRACTOR CONT	C 2000 1 2 2 2 1 2 2 2 2 2 2 2 2 2 2 2 2	A SERVICE AND A	Charles (Specification) and Charles (Specification) and Charles (Specification)

Existing Structure: (If permit being applied for is relevant to it)			Property	☐ Run a Business on	Relocate (existing bldg)	□ Conversion	☐ Addition/Alteration	□ New Construction	Value at Time of Completion Project * include donated time & material
1	ed for is relevant to it	, rm	☐ Foundation	n 🗆 No Basement	dg) 🗌 Basement	☐ 2-Story	ion 1-Story + Loft	n 1-Story	# of Stories and/or basement
	Length:						☐ Year Round	☐ Seasonal	Use
				□ None		□ 3	2	1	# of bedrooms
	Width: Height:	□ None	☐ Compost Toilet	☐ Portable (w/service contract)	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	☐ Sanitary (Exists) Specify Type:	☐ (New) Sanitary Specify Type:	☐ Municipal/City	What Type of Sewer/Sanitary System Is on the property?
	ght:				200 gallon)		□ Well	City	Water

Proposed Use	、	Proposed Structure	Dimensions	Square
		Principal Structure (first structure on property)	(x)	
		Residence (i.e. cabin, hunting shack, etc.)	×	
		with Loft	(X	
Residential Use	,	with a Porch	×	
		with (2 nd) Porch	(x	
		with a Deck	(x)	***************************************
		with (2 nd) Deck	×	
X Commercial Use		with Attached Garage	(×	
F		Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	~ ×	
		Mobile Home (manufactured date)	(x	
		Addition/Alteration (specify)	(x)	
Municipal Use		Accessory Building (specify)	(x)	
Doo'd for legizance		Accessory Building Addition/Alteration (specify)	(x)	
חפל מיוסי וסיימיים			, department of the second of	
		Special Use: (explain)	(×	***************************************
\$ C	×	Conditional Use: (explain)	(x	
Secretarial Staff		Other: (explain)	(X	

I (we) declare that this app am (are) responsible for th may be a result of **Bayfiel** above described property a TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
anying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) ormation I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which application. I (we) consent to county officials charged with administering county ordinances to have access to the Administrates

Authorized Agent:

Address to send permit

Owner(s):

(If there

are Multiple

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Deed All Owners must sign or letters

authorization

this application)

Date

Date

Attach

Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

Please complete (1) - (7) above (prior to continuing)

Setback to Privy (Portable, Composting)

Prior to the placement or construction of a structure within ten (10) feet of the minimum nother previously surveyed corner or marked by a licensed surveyor at the owner's expense Setback to Drain Field Setback from the West Lot Line Setback from the East Lot Line Setback from the North Lot Line Setback to Septic Tank or Holding Tank Setback from the South Lot Line Setback from the Centerline of Platted Road etback from the Established Right-of-Way Setbacks: (measured to the closest point) Description **で**身 Measurement Feet Feet Feet Feet Feet Feet Feet T) Setback from Wetland
20% Slope Area on property Setback from the River, Stream, Creek
Setback from the Bank or Bluff Setback to Well Elevation of Floodplain Setback from the Lake (ordinary dary line from which the setback must be measured must be visible from やられ Changes in plans must be approved by the Planning & Zoning Dept. Description \$ high-water mark) tructur 45 PCS CS+ Measurement eyed corner to the □ No Fee Feet Feet Feet Fee

marked by a lice ior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from a previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be arked by a licensed surveyor at the owner's expense.

Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W)

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code
The local Town, Village, City, State or Federal agencies may also require permits.

Condition(s):Town, Committee or Board Conditions Attached? Peur Conditions of Zoo	Date of Inspection:	for Structure forthermin	Was Proposed Building Site Delineated □ Yes □ No	Granted by Variance (B.O.A.) ☐ Yes No Case #: N A	Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Is Structure Non-Conforming Is Structure Non-Conforming	Permit #: - 150303	Permit Denied (Date):	Issuance Information (County Use Only)
Yes [No-(If No they need to be	Inspected by:	Request only et this time. L.U. Application	Were Property Li	Previously Granted	bus Lot(s)) Who Mitigation Required Who Mitigation Attached	Permit Date: 6-93-15	Reason for Denial:	Sanitary Number:
attached.)		1.4.1.4.1	Were Property Lines Represented by Owner	Previously Granted by Variance (B.O.A.) 1 Yes 12 No Case #:	□ Yes □XNo □ Yes □XNo			# of bedrooms:
	Date of Re-Inspection:	Zoning District (A	XYes NA	NA	Affidavit Required			Sanitary Date:
		1 2			Y Y N N O			

Hold For Sanitary:

Hold For TBA:

Hold For Affidavit:

Marded Hold For Fees:

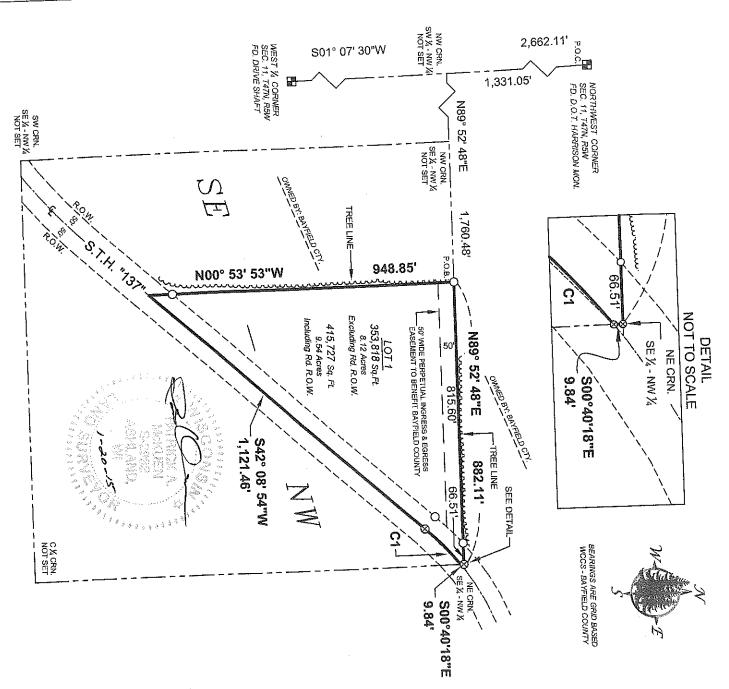
Date of Approval:

2013

Signature of Inspector:

SURVEY MAP NO. Selection

A PARCEL OF LAND LOCATED IN THE SE ½ OF THE NW ½, SECTION 11, TOWNSHIP 47 NORTH, RANGE 5 WEST,TOWN OF EILEEN,
BAYFIELD COUNTY, WISCONSIN.



LEGEND

CHORD CHORD CHORD CHORD CHORD CURVE BEARING DISTANCE C1 S46°24'31"W 158.50"

LENGTH RADIUS 158.74' 868.67'

CURVE TABLE

-SET 1 1/4" IRON WEIGHING 1.68 LBS -SET MAG. NAIL PIPE PER LIN. FOOT

300 SCALE

⊗

900'

Pine Ridge Land Surveying, LLC.
Professional Land Surveying Services

Patrack Quality in a Timely Manner.

PATRICK A. MCKUEN, PLS

29390 Woodland Rd.

Ashland, Wisco

Phone (715) 682-2969 Cell (715) 292-5601 WWW.PINERIDGESURVEYING.COM

PROJECT NO. BAYCTYLND15-11-47-5 SHEET 1 OF 2 SHEETS

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APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCOMSIN Stamp (Received) MAR. 30 2015

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		81-36-0	15-0005

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN!

Bayficid Co. Loning Dept.

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JUN 25 2015 Address to send permit 2

02480

ALRES

Lane

re signing on behalf of the owner(s) a SUNSET

accompany this application)

Attach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

Date

Secretarial Staff

Rec'd for/ssuance

Signature of Inspector:
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Date of Inspection:
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MAP / SKETCH of PROPERTY.



AREAS #1 + #2 Are POSSIBLE COCATIONS TO KEEP HONSE



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APPLICATION FOR PERMIT	EWIERED	Permit #: Date:	15:0007
Date Staffor (Received) AFR 7 0 2015		Amount Paid:	\$250 - Sparit
Bayfield Co. Zoning Dept.		Refund:	
APPLICANT. HOW DO I FILL OUT T	HIS APPLICATI	ON (visit our website ww	HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zonling/asp)
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the purpose of inspection. Be Deed All Owners must sen	ITAIN A PERMI nformation) has n I (we) am (are (we) am (are) I	in)	Conditional Use: (explain)	Special User (explain) Busha 55	≥	=	Mobile Home (manufactured date)	v/ (□ sanita	with Attached Garage	vith (2 nd) D	with a Deck	with (2 nd) Porch	with a Porch	(i.e. cabin, hunting shack, etc	cture (firs			(if permit being applied for is relevant to it)		Foundation	No Basement	Basement	2-Story	1-Story + Loft	1-Story	# of Stories and/or basement		is Property/Land within 1000 feet of Lake,	odplain?	feet of Rive	1 N	١	Lot(s)			vner(s))			m Kun		N ISSUED TO	4
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Date	t and complete. e a permit. I (w. ering county on	×	×	3 X 4	×	×	×	×	× ;	××	×	×	×	×	 	Dimensions		Į ,			contract)	Vaulted (min 200 gallon)	ecify Type:	Specify Type: _		Type of itary System property?			Floodpla		7'x 467		ion:	986	Donator Donator				3084		isite www.ba	
1.9-15	I (we) acknow e) further acce dinances to ha)))	_	<u> </u>	<u> </u>	_ ~	_		<u> </u>	_ -) ns	C	Height:		į		n 200 gallor	Ħ			Ħ		No	Floodplain Zone?		h	_		Page(s) _5/	Attached ☐ Yes ☐	Written Au	Plumber Phone:	715. 292	Cell Phone:	Telephone:	yfieldcounty.	
[]	t and complete. I (we) acknowledge that I (we) ge a permit. I (we) further accept liability which tering county ordinances to have access to the			+2											1	Footage	,					<u>=</u> 		Well	☐ City	Water		₹No	Present? □ Yes	Are Wetlands	ó			5/6	Attached No	Written Authorization	hone:	2.5401		30/0	.org/zoning/asp	

Address to send permit

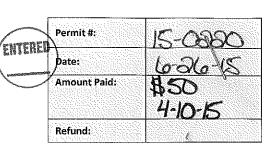
Authorized Agent:

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, Wi 54891 (715) 373-6138

APPLICATION FOR SIGN BAYFIELD COUNTY, WISCONSIN APR 1 0 2015 Bayfield Co. Zoning Dept



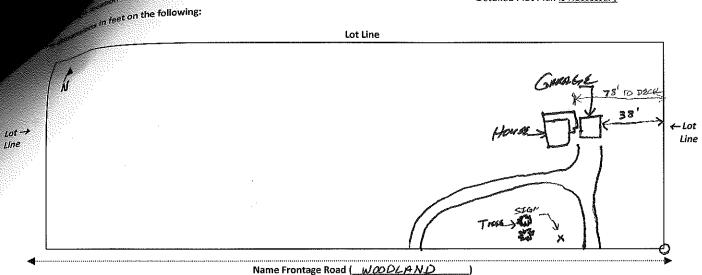
INSTRUCTIONS: No permits will be issued until all fees are paid.

		I UNTIL ALL PERMITS HAVE BEE		APPLICANT.						
Property Owner(s) N Patrick Julie M	lame: MG	EKUER		Mailing Address: 29390 W	oodland Ko	City/s	State/Zip: Sh/and, WI	5480	Phone: 715-	682.29
Sign Owner(s) Name	<u> КИЕ</u> ::	270		Mailing Address:		City/9	State/Zip:	······································	Phone:	
PATRICK	m	CKUPN		29390 Wood	Sland K	1. As	Uand, WI	5480	6 715.68	2.2969
Address of Property 29390 W		land Rd.		City/State/Zip:			806			
Contractor:			. *	Contractor Phone	: Addres	s:				
Authorized Agent: (Person S	igning Application on behalf of Ov	vner(s))	Agent Phone:	Agent	Mailing Ad	dress (include City	/State/Zip):	Attached	uthorization
	Τ			PIN: (23 digits)				Recorded D	Oocument: (i.e. Prope	rty Ownership)
PROJECT LOCATION	Lega	al Description: (Use Tax Sta	tement)	04-020-2-4	47-05 - Z	6-3 04	1-000-12500	l	<i>986</i> Page(s	
	Su	2 1/4 Gov't Lot	Lot(s)) CSM Vol	& Page	Lot(s) No.	Block(s) No.	Subdivision	:	
Section	26	, Township <u>47</u> N, Ran	ge <u>5</u>	_ W	mof: Z:leer		TO MOTOR PORTUGUES OF THE STATE	Lot Size	Acreage	;
	: 1	s Property/Land within 300 ek or Landward side of Floo		er, Stream (incl. inte If yescontinu		tance Stru	cture is from Sho	oreline :	Is Property in Floodplain Zone?	Are Wetlands
□ Shoreland —		Property/Land within 100	I feet of La	ke, Pond or Flowag	ge	tance Stru	cture is from Sh	oreline : feet	☐ Yes ☐ No	Present? Yes
Non-Shoreland	i.								not	ala
Value at Time of Completion * include donated time	1	Project (What are you applying for)			Тур		Length	Width	Height	Located in Town of
& material	[X]	On-Premise	⊅ New		☐ 1-Sided		4'	3'	5,	□ Yes
\$250.00		Off-Premise	□ Repla	cement	≫ 2-Sided	ı				TBA is required
					☐ On-Bui					.¥ No
am (are) responsible f may be a result of Ba above described prop	or the de yfield Co orty at an	FAILURE TO OBTA ion (including any accompanying info tail and accuracy of all information I unty relying on this information I (w y reasonable time for the purpose of where listed on the Deed All O	rmation) has b (we) am (are) e) am (are) pr inspection.	providing and that it will oviding in or with this ap) and to the best of be relied upon by I oplication. I (we) co	my (our) kno Bayfield Cour Insent to cou	wledge and belief it is a nty in determining whe nty officials charged w	true, correct and ther to issue a pr ith administering	ermit. (we) further accep	ot liability which we access to the
Applicant(s):		f you are applying for an <u>Off-</u>	nramica sic	m. the economy own	agre must also	cian this fo	rm)	D	ate	
Authorized Ager		f you are signing on behalf of						D	ate	
Address to send									<u>Attach</u>	
Rec'd for Is	WENNESS TO THE PERSON NAMED IN						If you recently	purchased the	Copy of Tax Stateme property send your Re	
JUN 26	2015	eige-warran namer prints	PLEAS	SE COMPLETE PLO	OT PLAN ON	REVERSE	SIDE			

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. Secretarial Staff The local Town, Village, City, State or Federal agencies may also require permits.

IMPORTANT Detailed Plot Plan is Neccessary





Setbacks: (measured to the closest point)

Description	Measurem	1ent		Description	Measurem	ent
Setback from the Centerline of Platted Road	37	Feet		Setback from the North Lot Line	430	Feet
Setback from the Established Right-of-Way	4	Feet	12.00	Setback from the South Lot Line	37	Feet
	T T			Setback from the West Lot Line	384	Feet
Setback from Lake, River, Stream or Pond	-	Feet		Setback from the East Lot Line	83	Feet
Setback from Other Sign(s)		Feet		2		

Sign Plan (Fill in Information Desired on Sign)

Land Surveying

(715) 682-2969

Patrick A. McKnen, PLS

WWW. pineridge surveying.com

Issuance Information (County Use Only)		Permit Number: 15	-0880	Permit Date:	lod6-18	
Permit Denied (Date):		Reason for Denial:				
Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #: >	1		Previously Grante	d by Variance (B.O.A.) Case	#:	
Was Parcel Legally Created Was Proposed Building Site Delineated	Yes □ No □ Yes v No	Vagradow, signalia ingga kangang bagan panaga	Were Property	Lines Represented by Owner Was Property Surveyed	yes □Yes	□ No □ No
Inspection Record:					Zoning District Lakes Classification	142°() (NA)
Date of Inspection: 5-12-15		Inspected by:	WOON PS	od Murphy	Date of Re-Inspect	ion: ^t
Condition(s): Town, Committee or Board Co		ched?		attached.) REJUENTS W DVED) NANCE	L FAMF =·	TEU)
Signature of Inspector:		Y.Son(A)			Date of Approx	al: 15
- Commonweal Commonwea)	*				

SUBMIT: <u>COMPLETED</u> APPLICATION, TAX Bayfield County Planning and Zoning Depart.

Planning and 2011179, PO Box 58
Washburn, WI 54891
(715) 373-6138





DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Bayfield Co. Zoning Dept

D

INSTRUCTIONS; No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department

CHIENED) Refund: Date: Permit #: Amount Paid: \$ 1000 K 15-0321 St 018-0

54BSESE 1/4, Address of Property: TYPE OF PERMIT REQUESTED Z Existing Structure: (If permit being applied for is relevant to it)
Proposed Construction: X Non-Shoreland ☐ Shoreland Authorized Agent: of Completion Rec'd for Issuance donated time & Value at Time FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

The place of the detail and accuracy of all information (we) an (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection. M. Chas PROJECT LOCATION Commercial Use Municipal Use Residential Use Proposed Use include Section 000 00 N Hastro (Person Sig -☐ Run a Business on S $\hfill\square$ Is Property/Land within 1000 feet of Lake, Pond or Flowage ☐ Is Property/Land within 300 feet of River, Stream (Incl. Inter Creek or Landward side of Floodplain? If yes—continu Legal Description: (Use Tax Statement) Property New Construction Conversion Addition/Alteration , Township 1/4 Project Ø Ş Radtha Other: (explain) Conditional Use: (explain) Special Use: (explain) Residence (i.e. cabin, hunting shack, etc. Principal Structure (first structure on property) X LAND USE Mobile Home (manufactured date) **Accessory Building** Accessory Building Addition/Alteration (specify) Addition/Alteration (specify) Bunkhouse w/ (☐ sanitary, or Gov't Lot N, Range # of Stories and/or basement with Loft with a Porch with Attached Garage with a Deck with (2nd) Porch with (2nd) Deck Foundation

Slab on G 1-Story No Basement Basement 1-Story + Loft SANITARY PRI Lot(s) V (specify) **PIN**: (23 digits) **04-** 020 - 2 30960 City/State/Zip: ≥ Agent Phone: Contractor Phone Ashland If yes---continue 0.70 sleeping quarters, or a cooking & food prep facilities) Proposed Structure Length: Length: -continue Hagstran Seasonal Year Round PRIVY Vol & Page Town of: Use 47-05-13-404-₽ Plumber: Crary kabasa Agent Mailing Address (include City/State/Zip): 5 CONDITIONAL USE Distance Structure is from Shoreline : Distance Structure is from Shoreline : bedrooms 30845 None N 11 앜 Lot(s) No. # Ashland City/State/Zip: 000 Width: Width: -20000 Sanitary (Exists) Specify Type: Apond V
Privy (Pit) or Vaulted (min 200 gallon) Block(s) No. None (New) Compost Toilet Portable (w/service contract) 7 Sanitary Sewer/Sanitary System is on the property? What Type of Lot Size Recorded Document: (i.e. 4806 Specify Type: 32 **Dimensions** Is Property in Floodplain Zone? $\times |\times| \times |\times|$ \times | \times | \times × × Height: 7 ⊠Yes No S Height: Telephone: 715) 853-1347 Attached

Yes No
(i.e. Property C 115 292-Cell Phone: Plumber Phone: Written Authorization Page(s) 849 274 2890-589 OTHER Are Wetlands
Present?

_ Yes Footage 728 X 3743 Square **₹** No J.Z. Water City

Address to send permit

Same

28

500

φ

Authorized Agent:

(If you are signing on behalf of the

owner(s) a letter of authorization

must accompany this application)

Owner(s):

(If there are Multiple

listed on the Deed

All Owners

must sign

or letter(s) of authorization

must accompany this application)

Date

-23-15

Setback from the North Lot Line
Setback from the South Lot Line
Setback from the West Lot Line
Setback from the East Lot Line Inspection Record: www. Hold For Sanitary: Inspection Record: where removing dwelling (existing). Asked for permit for new dwelling. Zoning District out to read we are applied for a non-hab building w/ wine entropy to move at the conting District of nice it very clear that to would be citally ATT- permits required if they habitationakes Classification (NA Date of Inspection:

Condition(s): Town, Committee or Board Conditions Attached? | Yes | No-(If No they need to be attached). Granted by Variance (B.O.A.) Signature of Inspector: Issuance Information (County Use Only) Permit Denied (Date): Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense. Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Permit #: Setback to Privy (Portable, Composting)

Prior to the placement or construction of a structure within ten (10) feet of the minimum restains previously surveyed corner or marked by a licensed surveyor at the owner's expense. Setback to Drain Field Setback from the Established Right-of-Way Setback from the Centerline of Platted Road WALING Was Parcel Legally Created Was Proposed Building Site Delineated etback to Septic Tank or Holding Tank 330 Please complete (1) - (7) above (prior to continuing) なできる 80 Show any (*): Show any (*): Show: Show: Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DE), Holding Tank (HT), Privy (P), and Well (W) Setbacks: (measured to the closest point) **Show Location of:** Show / Indicate: Show Location of (*): CAN't NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code
The local Town, Village, City, State or Federal agencies may also require permits. Description を表す 二二 Draw or Sketch your Property (regardless of what you are applying for) るま have or Board Conditions Attached? ロ ves カークラ 2, Case #: ي محدر Hold For TBA: □ Yes さなべ all (Fused/Contiguous Lot(s)) (Deed of Record) THE WAY IN THE Proposed Construction

North (N) on Plot Plan

(*) Driveway and (*) Frontage Road (Name Frontage Road)

All Existing Structures on your Property

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond

(*) Wetlands; or (*) Slopes over 20% R. □ □ □ accessing といれたの Harry Halo Sanitary Number: Reason for Denial: Permit Date: Measurement accs, bbg. Hold For Affidavit: 099 by (du 8 8 8 Feet Feet Feet Feet Feet Feet Feet Feet T 171605 7 てらる Mitigation Required Mitigation Attached 36-18 Previously Granted by Variance (B.O.A.) Setback from Wetland
20% Slope Area on property
Elevation of Floodplain Öv Were Property Lines Represented by Owner
Was Property Surveyed Setback to Well Setback from the Bank or Bluff Setback from the River, Stream, Creek Setback from the Lake (ordinary high-water mark) lary line from which the setback must be measured must be visible from THIS CEN DIT のた がおり あな 2 Changes in plans must be approved by the Planning & Zoning Dept. # of bedrooms: 250 pe Hold For Fees: 1 par ୁ Yes ୁ Yes Description 3050 000 N N N 43 Chara 20 2952 Je w Affidavit Required Affidavit Attached Sanitary Date: □ Yes 2 tame! さればかれ Date of Approval: 13)00/NU Yes が古る Measurement □ Yes Õ eyed corner to the N N □ Z Z Z Z No Feet Feet Feet Feet

replacing

principal

bld & (house)

will

become

to

rew

purepapho